

The Office of Traffic Safety (OTS) strives to provide the best services possible. By completing this customer service questionnaire you will be contributing insight on how OTS may better serve current and future customers. So that this survey may be accurately tallied, please answer each question with the ONE answer that most appropriately suits your organization. Thank you for taking the time to complete the survey.

Ray Biancalana  
Deputy Director

1. Are you familiar with the range of services provided by the Office of Traffic Safety (OTS)?  
☐ Very familiar  
☐ Somewhat familiar  
☐ Not at all familiar
2. Please use the alpha letters A, B, C, D, E, F, G, H, I to rank the following categories in order of importance, with A being most important and I being least important. Please remember to consider their importance as they relate to your community.  
  
☐ Alcohol/Drugs (AL): programs toward reducing alcohol/drug related crashes.  
☐ Occupant Protection (OP): programs to increase the use of child safety seats, seat belts and air bags.  
☐ Police Traffic Services (PTS): decrease traffic crash problems through selective traffic enforcement, public information, education equipment and training.  
☐ Traffic Records (TR): improve data collection of traffic crashes.  
☐ Emergency Medical Services (EMS): develop and enhance methods of responding to crashes and transporting and treating injured persons.  
☐ Motorcycles (MC): to reduce deaths and injuries associated with motorcycle crashes.  
☐ Pedestrians/Bicycles(PS): to prevent and reduce the number of deaths and injuries.  
☐ Roadway Safety (RS): to combat traffic crashes through engineering activities, education and enforcement.  
☐ Speed Control: to improve compliance with posted speed limits through enforcement, public information, education, equipment and training.
3. Has your agency ever received a grant funds from OTS?  
  
☐ Yes (continue) ☐ No (skip to #7)
4. How long has it been since the conclusion of your grant?  
  
☐ Within the past year ☐ More than 1 year but less than 3 ☐ More than 3 years ago
5. Based on your experiences working with OTS staff, please rate the:
  - a. Helpfulness of the OTS staff in providing training and other assistance during the Adraft project agreement≡ period?  
☐ Poor  
☐ Fair  
☐ O.K.  
☐ Good  
☐ Excellent
  - b. Training the OTS staff provided to explain the process for submitting AQuarterly Performance Reports≡ andAReimbursement Claims≡?  
☐ Poor  
☐ Fair  
☐ O.K.  
☐ Good  
☐ Excellent

c. Ongoing assistance you received from the OTS staff.

- ☐ Poor
- ☐ Fair
- ☐ O.K.
- ☐ Good
- ☐ Excellent

d. Promptness of the OTS staff in responding to your inquiries?

- ☐ Poor
- ☐ Fair
- ☐ O.K.
- ☐ Good
- ☐ Excellent

e. OTS staff=s knowledge of Highway Safety Programs?

- ☐ Poor
- ☐ Fair
- ☐ O.K.
- ☐ Good
- ☐ Excellent

f. Please indicate any OTS staff person you would like to commend

\_\_\_\_\_ Name(s)  
\_\_\_\_\_

6. Does your agency possess electronic communication capabilities such as e-mail and electronic reporting?

Yes \_\_\_\_\_ No \_\_\_\_\_

7. Please make any suggestions or recommendations on ways the OTS can improve its services to its customers.

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